 Internal Case Management System Worksheet - Internal Affairs Log				Top Allegation FAIL TO PREPARE REPORT - COMPLAINT REPORT		Group CC-COMMAND CENTER Date of This Report 01/23/2020	
Date Reported 01/23/2020	Date Assigned	IAB Log No 2020-2426	Case No (CC) 2020-2426	Folder Type		Follow Up No 1	Worksheet Tracking No. 4287541

Date/Time Reported 01/23/2020 16:03	SOL Date 07/23/2021	Occurrence From Date/Time 01/23/2020 15:05	Occurrence To Date/Time 01/23/2020 16:26
Contact Type TELEPHONE	Source 911	Source Number 2574	Position Number RECORDED LINE

Person's Last Name, First M.I. [REDACTED]			Role COMPLAINANT		Status CIVILIAN NON MEMBER OF SERVICE		Res. Pct.
Anonymous NO		Anonymous#		Call Back Code			
Nickname/Alias/Middle Name							
Address [REDACTED]					Apt No. [REDACTED]		NYSID No.
Alternate Address					Apt No.		
Sex FEMALE	Race WHITE HISPANIC	Date of Birth [REDACTED]	Age [REDACTED]	Height	Weight		
Age From	Age To	Condition	If Injured or Deceased Location		U.S. Citizen		State/Country of Birth
Home Telephone	Business Telephone	Cell Phone [REDACTED]	Beeper #	E-Mail Address	Call Back Phone# [REDACTED]		
This Person and Subject Live Together		Identify Subject?	This Person States Subject is				

Person's Last Name, First M.I.			Role CIVILIAN SUBJECT		Status CIVILIAN NON MEMBER OF SERVICE		Res. Pct.
Anonymous NO		Anonymous#		Call Back Code			
Nickname/Alias/Middle Name							
Address					Apt No.		NYSID No.
Alternate Address					Apt No.		

Sex FEMALE	Race BLACK	Date of Birth	Age	Height	Weight	
Age From 0	Age To 0	Condition	If Injured or Deceased Location		U S Citizen	State/Country of Birth
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address	Call Back Phone#	
This Person and Subject Live Together	Identify Subject?	This Person States Subject is				

Person's Last Name, First M.I.			Role CIVILIAN SUBJECT		Status CIVILIAN NON MEMBER OF SERVICE		Res. Pct.
Anonymous NO	Anonymous#			Call Back Code			
Nickname/Alias/Middle Name							
Address					Apt No.		NYSID No.
Alternate Address					Apt No.		
Sex FEMALE	Race BLACK	Date of Birth	Age	Height	Weight		
Age From 0	Age To 0	Condition	If Injured or Deceased Location		U.S. Citizen	State/Country of Birth	
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address	Call Back Phone#		
This Person and Subject Live Together	Identify Subject?	This Person States Subject is					

Person's Last Name, First M.I. [REDACTED]			Role WITNESS		Status CIVILIAN NON MEMBER OF SERVICE		Res. Pct.
Anonymous NO	Anonymous #			Call Back Code			
Nickname/Alias/Middle Name							
Address					Apt No		NYSID No
Alternate Address					Apt No.		
Sex	Race	Date of Birth [REDACTED]	Age 1	Height	Weight		
Age From	Age To	Condition	If Injured or Deceased Location		U.S. Citizen	State/Country of Birth	
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address	Call Back Phone#		

NO					
Nickname/Alias/Middle Name					
Address				Apt No.	NYSID No.
Alternate Address				Apt No	
Sex	Race	Date of Birth	Age	Height	Weight
Age From	Age To	Condition	If Injured or Deceased Location		U.S. Citizen
					State/Country of Birth
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address	Call Back Phone#
This Person and Subject Live Together		Identify Subject?	This Person States Subject is		

Person's Last Name, First M.I.		Role		Status		Res. Pct.
		WITNESS		CIVILIAN NON MEMBER OF SERVICE		
Anonymous	Anonymous #		Call Back Code			
NO						
Nickname/Alias/Middle Name						
Address				Apt No		NYSID No
Alternate Address				Apt No.		
Sex	Race	Date of Birth	Age	Height	Weight	
Age From	Age To	Condition	If Injured or Deceased Location		U.S. Citizen	State/Country of Birth
0	0					
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address	Call Back Phone#	
This Person and Subject Live Together		Identify Subject?	This Person States Subject is			

Person's Last Name, First M.I.		Role		Status		Res. Pct.
		SUBJECT		UNKNOWN UNI MEM OF SERVICE		
Nickname/Alia /Middle Name						
Address				Apt No.		NYSID No.
Alternate Address				Apt No.		
Sex	Race	Date of Birth	Age	Height	Weight	
Age From	Age To	Condition	If Injured or Deceased Location		U S Citizen	State/Country of Birth
0	0					
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address	Call Back Phone#	

Allegations									
1	Full Allegation Fail to Take Police Action - On Other Incident	Classification Abuse of Dept Regulations	Allegation Index Fail to Take Action/Investigate/Complete Report	Allegation Date 01/23/2020	Finding -	Finding Date	Allegation Removed NO	Allegation Disposition	
Comments									
2	Full Allegation Fail to Prepare Report - Complaint Report	Classification Abuse of Dept Regulations	Allegation Index FTR-Fail to Take/Make Report	Allegation Date 01/23/2020	Finding -	Finding Date	Allegation Removed NO	Allegation Disposition	
Comments									

Person's Last Name, First M.I.				Role SUBJECT		Status UNKNOWN UNI MEM OF SERVICE		Res. Pct.	
Nickname/Alias/Middle Name									
Address						Apt No.		NYSID No.	
Alternate Address						Apt No.			
Sex	Race	Date of Birth	Age	Height	Weight				
Age From 0	Age To 0	Condition	If Injured or Deceased Location		U.S. Citizen			State/Country of Birth	
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address	Call Back Phone#				

Allegations									
1	Full Allegation Fail to Prepare Report - Complaint Report	Classification Abuse of Dept Regulations	Allegation Index FTR-Fail to Take/Make Report	Allegation Date 01/31/2020	Finding -	Finding Date	Allegation Removed NO	Allegation Disposition	
Comments									
2	Full Allegation Fail to Take Police Action - On Other Incident	Classification Abuse of Dept Regulations	Allegation Index Fail to Take Action/Investigate/Complete Report	Allegation Date 01/31/2020	Finding -	Finding Date	Allegation Removed NO	Allegation Disposition	
Comments									
3	Full Allegation Other Dept Rules/Procedures Violation -	Classification Abuse of Dept Regulations	Allegation Index VRP-Violation Rules/Procedures	Allegation Date 01/31/2020	Finding -	Finding Date	Allegation Removed NO	Allegation Disposition	Other Dept Rules/Procedures Violation Details Laughing at c/v
Comments									

Incident Documents

Property	Property Status
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Evidence

Evidence Collected	Evidence Collection Team Crime Scene Requested	Who Responded	ECT/CSU Run No.
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ATTACHMENT

1	 'Audio 1'
2	 'Audio 2'
3	 'Audio 3'
4	 'ICAD 20012317710'
5	 'ICAD 20012319029'

Incident Location List

1	Location Type OCCURRENCE	Jurisdiction	In or Near NYPD Command	PCT 120-120 PRECINCT	Common Locations Outside of NYC	
	Address Location NYC	Location Within FRONT OF	Street [REDACTED]	City STATEN ISLAND	State NY	Apt #
	Cross Street [REDACTED]		Intersection of	Premise Type	Indicate Premise Name if Known	Exact Location Within Premise Type, if Known
	Occurrence/Effective On or From 01/23/2020 15:05	Occurrence Through 01/23/2020 16:26	Statement of Details Specific to this Location			

Topic/Subject:

(Internal Affairs Log) INTERNAL AFFAIRS LOG

Details

On January 23, 2020 at 1603 hours, I received a call from 911 Operator# 2574, Interpreter# 3131 with complainant [REDACTED] on the line. The complainant disengaged the call at 1606 hours before providing any further information.
The details are as follows:

At 1631 hours, I spoke to complainant [REDACTED], with Interpreter# 261907, who stated she called the police to report her neighbor had damaged her door and hit her in the face. The complainant refused medical attention while on the line. The first responding unit asked for her ID but did not take a report or arrest the complainant's neighbor. The complainant added the officers laughed in her face that she did not speak English. The complainant further stated "a few officers were on scene" the first time. The complainant stated she then called the police a second time and approximately 6-7 officers arrived and failed to take a report or arrest the complainant's neighbor again. The complainant lastly stated two black females damaged her door and scared the children inside the residence, who are being used in this log as witness. The complainant could only provide partial information for the children. At 1710 hours, I spoke to the complainant, with Interpreter# 351446, who provided her personal information. The complainant could not provide any descriptive information in regards to the officers on scene but would send video to the C/C cell phone.

ICMS query did not reveal any prior related logs.

DAS query revealed the following ICADs and have been uploaded to this log as attachments:


ICAD# 20012317710 with the responding units as 120A1-2, 120B2-2, 120D1-2, 120RES3-3, 120ST1-2, and STAPLE. The job was marked as UF-61 completed by 120D1-2. ICAD# 20012319029 with the responding units as 120C1-3, 120D1-3, 120RES3-3, and 120ST1-3. The job was marked as 10-93c completed by 120D1-3.

Omniform query did not reveal any UF-61s generated at this time.

ARCS query revealed an Unfinalized Arcs Report for the Second Platoon and Third Platoon at this time.

C/C Audio attached.

List of Persons Added/Updated in the Log

Person's Last Name, First M.I. KIRCHHOFFER, MICHAEL L			Role SUBJECT	Status UNIFORM MEMBER OF SERVICE	Res. Pct.
MOS TAXID 956023	Command 120-120 PRECINCT	Rank POM	Shield 15215		
Appointment Date 01/08/2014			Years Employed 6		
Nickname/Alias/Middle Name					

Allegations

1	Full Allegation Fail to Take Police Action - On Other Incident	Classification Abuse of Dept Regulations	Allegation Index Fail to Take Action/Investigate/Complete Report	Allegation Date 01/23/2020	Finding 12 - Unsubstantiated	Finding Date 02/07/2020	Allegation Removed NO	Allegation Disposition
Comments After conducting an investigation and reviewed BWC footage/ complaint report it is the investigating supervisors conclusion that there was no wrong doing on the part of the UMOS involved and no further actions are required. Based on the information provided by the complainant the officers determined there was a dispute between neighbors and a Harassment report was prepared in regards.								
2	Full Allegation	Classification	Allegation Index FTR-Fail to Take/Make Report	Allegation Date	Finding	Finding Date	Allegation Removed	Allegation Disposition

Reporting Officer:	Rank POM	Name MELEXENIS JORDAN		Tax Reg. No. 958922		Command CC-COMMAND CENTER
Reviewing Supervi or	Manner of Clo ing -	Date Reviewed 01/31/2020	Date of Next Review	Name CHESTERFIELD SHEMIKA		Supv Tax No 945582
Endorser:	Rank SGT	Name NICHOLS DESMUND	Tax Reg. No. 944850	Command CC-COMMAND CENTER	DateTime Reviewed 01/23/2020 20:15	Status
	Comments					
Endorser:	Rank DT3	Name CHESTERFIELD SHEMIKA	Tax Reg. No. 945582	Command ADM-ADMINISTRATION	DateTime Reviewed 01/31/2020 09:35	Status
	Comments OG 120 PCT					

